

**EXHIBIT 3**  
**to the Declaration of Mara Gassmann**

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Form 990-PF

Department of the Treasury  
Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.

Go to [www.irs.gov/Form990PF](https://www.irs.gov/Form990PF) for instructions and the latest information.

OMB No 1545-0052

2018

Open to Public Inspection

For calendar year 2018, or tax year beginning 07-01-2018, and ending 06-30-2019

Name of foundation  
EDGAR AND ELSA PRINCE FOUNDATION

% ALLAN HOEKSTRA

Number and street (or P O box number if mail is not delivered to street address)  
190 S RIVER AVE Suite 300

Room/suite

City or town, state or province, country, and ZIP or foreign postal code  
HOLLAND, MI 49423

G Check all that apply

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

H Check type of organization

☒ Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust

☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 15,338,903

J Accounting method

☒ Cash

☐ Accrual

☐ Other (specify) (Part I, column (d) must be on cash basis )

A Employer identification number  
38-2190330

B Telephone number (see instructions)  
(616) 494-8100

C If exemption application is pending, check here

D 1. Foreign organizations, check here

D 2. Foreign organizations meeting the 85% test, check here and attach computation

E If private foundation status was terminated under section 507(b)(1)(A), check here

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	0		
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B			
	3 Interest on savings and temporary cash investments	120,861	120,861	
	4 Dividends and interest from securities	262,494	262,494	
	5a Gross rents			
	b Net rental income or (loss)			
	6a Net gain or (loss) from sale of assets not on line 10	806,633		
	b Gross sales price for all assets on line 6a	17,159,485		
	7 Capital gain net income (from Part IV, line 2)		797,946	
	8 Net short-term capital gain			
	9 Income modifications			
	10a Gross sales less returns and allowances			
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)	24			
12 Total. Add lines 1 through 11	1,190,012	1,181,301		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0		
	14 Other employee salaries and wages			
	15 Pension plans, employee benefits			
	16a Legal fees (attach schedule)			
	b Accounting fees (attach schedule)	8,496	4,248	0
	c Other professional fees (attach schedule)	68,468	68,468	
	17 Interest			
	18 Taxes (attach schedule) (see instructions)	9,894	9,894	
	19 Depreciation (attach schedule) and depletion			
	20 Occupancy			
	21 Travel, conferences, and meetings			
	22 Printing and publications			
	23 Other expenses (attach schedule)	175,000		
	24 Total operating and administrative expenses. Add lines 13 through 23	261,858	82,610	0
	25 Contributions, gifts, grants paid	3,854,800		
	26 Total expenses and disbursements. Add lines 24 and 25	4,116,658	82,610	0
	27 Subtract line 26 from line 12			
	a Excess of revenue over expenses and disbursements	-2,926,646		
	b Net investment income (if negative, enter -0-)		1,098,691	
c Adjusted net income (if negative, enter -0-)				

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2018)

Part II Balance Sheet		Beginning of Year	End of Year
		(a) Book Value	(b) Book Value
		(c) Fair Market Value	
Assets	1 Cash—non-interest-bearing . . . . .		
	2 Savings and temporary cash investments . . . . .	-12,829	350,981
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____		
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____		
	5 Grants receivable . . . . .		
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .		
	7 Other notes and loans receivable (attach schedule) ▶ _____ 2,450,000 Less allowance for doubtful accounts ▶ _____	2,800,000	2,450,000
	8 Inventories for sale or use . . . . .		
	9 Prepaid expenses and deferred charges . . . . .		
	10a Investments—U S and state government obligations (attach schedule)		
	b Investments—corporate stock (attach schedule) . . . . .	8,174,630	151,866
	c Investments—corporate bonds (attach schedule) . . . . .	7,340,933	12,423,241
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____		
	12 Investments—mortgage loans . . . . .		
	13 Investments—other (attach schedule) . . . . .		
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____		
15 Other assets (describe ▶ _____)			
16 <b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	18,302,734	15,376,088	
Liabilities	17 Accounts payable and accrued expenses . . . . .		
	18 Grants payable . . . . .		
	19 Deferred revenue . . . . .		
	20 Loans from officers, directors, trustees, and other disqualified persons		
	21 Mortgages and other notes payable (attach schedule). . . . .		
	22 Other liabilities (describe ▶ _____)		
	23 <b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>		
	24 Unrestricted . . . . .		
	25 Temporarily restricted . . . . .		
	26 Permanently restricted . . . . .		
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>		
	27 Capital stock, trust principal, or current funds . . . . .	18,302,734	15,376,088
	28 Paid-in or capital surplus, or land, bldg , and equipment fund		
	29 Retained earnings, accumulated income, endowment, or other funds		
30 <b>Total net assets or fund balances</b> (see instructions) . . . . .	18,302,734	15,376,088	
31 <b>Total liabilities and net assets/fund balances</b> (see instructions) .	18,302,734	15,376,088	

Part III Analysis of Changes in Net Assets or Fund Balances		
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	18,302,734
2 Enter amount from Part I, line 27a . . . . .	2	-2,926,646
3 Other increases not included in line 2 (itemize) ▶ _____	3	
4 Add lines 1, 2, and 3 . . . . .	4	15,376,088
5 Decreases not included in line 2 (itemize) ▶ _____	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	15,376,088

**Part IV Capital Gains and Losses for Tax on Investment Income** Case 1:21-cv-10075-LAP Document 97-3 Filed 03/29/22 Page 4 of 59

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1 a PUBLICLY TRADED SECURITIES</b>				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> 17,159,485		16,361,539	797,946
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
<b>a</b>			797,946
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

<b>2</b> Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	<b>2</b>	797,946
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8		<b>3</b>	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2017	3,769,537	20,728,496	0.181853
2016	4,809,399	24,330,456	0.19767
2015	2,996,135	26,921,816	0.11129
2014	4,676,227	30,436,484	0.153639
2013	4,885,125	32,768,541	0.14908

<b>2</b> Total of line 1, column (d)	<b>2</b>	0.793532
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	0.158706
<b>4</b> Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	<b>4</b>	16,863,518
<b>5</b> Multiply line 4 by line 3	<b>5</b>	2,676,341
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	10,987
<b>7</b> Add lines 5 and 6	<b>7</b>	2,687,328
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	3,859,048

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

**Part VI** Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(c), or 4948—See instructions)

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	10,987
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	10,987
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	10,987
<b>6</b>	Credits/Payments		
<b>a</b>	2018 estimated tax payments and 2017 overpayment credited to 2018	<b>6a</b>	20,018
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	20,018
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	9,031
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2019 estimated tax</b> <input type="checkbox"/> 9,031 <b>Refunded</b> <input type="checkbox"/>	<b>11</b>	

**Part VII-A** Statements Regarding Activities

<b>1a</b>	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	Yes	No
<b>b</b>	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). . . . . If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	<b>1b</b>		No
<b>c</b>	Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>		No
<b>d</b>	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____			
<b>e</b>	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____			
<b>2</b>	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . If "Yes," attach a detailed description of the activities	<b>2</b>		No
<b>3</b>	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .	<b>3</b>		No
<b>4a</b>	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>		No
<b>b</b>	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>		
<b>5</b>	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T	<b>5</b>		No
<b>6</b>	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	<b>6</b>	Yes	
<b>7</b>	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV . . . . .	<b>7</b>	Yes	
<b>8a</b>	Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> MI _____			
<b>b</b>	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	<b>8b</b>	Yes	
<b>9</b>	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV . . . . .	<b>9</b>		No
<b>10</b>	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .	<b>10</b>		No

**Part VII-A Statements Regarding Activities (continued)** Case 1:21-cv-10075-LAP Document 37-3 Filed 03/29/22 Page 6 of 59

<b>11</b>	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions. . . . .	<b>11</b>		<b>No</b>
<b>12</b>	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions. . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ▶ ALLAN HOEKSTRA Telephone no ▶ (616) 494-8100			

Located at ▶ 190 S RIVER AVE SUITE 300 HOLLAND MI ZIP+4 ▶ 49423

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here . . . . . ▶ <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶ <b>15</b>			
<b>16</b>	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . . See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶	<b>16</b>	<b>Yes</b>	<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. . . . . Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/>	<b>1b</b>		
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018? . . . . .	<b>1c</b>		<b>No</b>
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
<b>a</b>	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? . . . . . If "Yes," list the years ▶ 20____, 20____, 20____, 20____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions). . . . .	<b>2b</b>		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018). . . . .	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	<b>4b</b>		<b>No</b>

**Part VII-B** **Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

		<b>Yes</b>	<b>No</b>
<b>5a</b>	During the year did the foundation pay or incur any amount to		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.	<b>5b</b>	
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>	
<b>c</b>	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870	<b>6b</b>	
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>b</b>	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	<b>7b</b>	
<b>8</b>	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

**Part VIII** **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
<b>(a)</b> Name and address	<b>(b)</b> Title, and average hours per week devoted to position	<b>(c)</b> Compensation (If not paid, enter -0-)	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	<b>(e)</b> Expense account, other allowances
See Additional Data Table				
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
<b>(a)</b> Name and address of each employee paid more than \$50,000	<b>(b)</b> Title, and average hours per week devoted to position	<b>(c)</b> Compensation	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	<b>(e)</b> Expense account, other allowances
<b>Total number of other employees paid over \$50,000.</b>				





**Part X Minimum Investment Return** (All domestic foundations must complete this part. See instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	13,190,486
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	1,261,087
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	2,668,750
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	17,120,323
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	17,120,323
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	256,805
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	16,863,518
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	843,176

**Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	843,176
<b>2a</b>	Tax on investment income for 2018 from Part VI, line 5.	<b>2a</b>	10,987
<b>b</b>	Income tax for 2018 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	10,987
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	832,189
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	
<b>5</b>	Add lines 3 and 4.	<b>5</b>	832,189
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	832,189

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	3,859,048
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	0
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	0
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	0
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	3,859,048
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	<b>5</b>	10,987
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	3,848,061

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
<b>1</b> Distributable amount for 2018 from Part XI, line 7				832,189
<b>2</b> Undistributed income, if any, as of the end of 2018				
<b>a</b> Enter amount for 2017 only. . . . .			0	
<b>b</b> Total for prior years 2016, 2015, 2014		0		
<b>3</b> Excess distributions carryover, if any, to 2018				
<b>a</b> From 2013. . . . . 3,260,555				
<b>b</b> From 2014. . . . . 4,676,227				
<b>c</b> From 2015. . . . . 1,661,727				
<b>d</b> From 2016. . . . . 3,680,848				
<b>e</b> From 2017. . . . . 2,773,076				
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	16,052,433			
<b>4</b> Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ <u>3,859,048</u>				
<b>a</b> Applied to 2017, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2018 distributable amount. . . . .				832,189
<b>e</b> Remaining amount distributed out of corpus	3,026,859			
<b>5</b> Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	19,079,292			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .				
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019 . . . . .				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .				
<b>8</b> Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions). . . . .	3,260,555			
<b>9</b> <b>Excess distributions carryover to 2019.</b> Subtract lines 7 and 8 from line 6a . . . . .	15,818,737			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2014. . . . . 4,676,227				
<b>b</b> Excess from 2015. . . . . 1,661,727				
<b>c</b> Excess from 2016. . . . . 3,680,848				
<b>d</b> Excess from 2017. . . . . 2,773,076				
<b>e</b> Excess from 2018. . . . . 3,026,859				

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .	Tax year	Prior 3 years			(e) Total
		(a) 2018	(b) 2017	(c) 2016	(d) 2015	

<b>b</b>	85% of line 2a . . . . .				
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c	Qualifying distributions from Part XII, line 4 for each year listed . . . . .				
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<b>d</b>	Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
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e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .				
---	---	--	--	--	--

3	Complete 3a, b, or c for the alternative test relied upon				
---	---	--	--	--	--

a	"Assets" alternative test—enter					
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(1) Value of all assets . . . . .					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					

<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
---	--	--	--	--	--

c "Support" alternative test—enter				
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(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).					
--	--	--	--	--	--

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(1)(3)(B)(iii).					
---	--	--	--	--	--

(3) Largest amount of support from an exempt organization					
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(4) Gross investment income					
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**Part XV** **Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

a The name, address, and telephone number or email address of the person to whom applications should be addressed

**b** The form in which applications should be submitted and information and materials they should include

c. Any submission deadlines

c. Any submission deadlines

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d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV** **Supplementary Information** (continued) **Case 1:21-cv-10075-LAP Document 37-3 Filed 03/29/22 Page 12 of 59****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . . ▶ 3a</b>				
<b>b</b> <i>Approved for future payment</i> HOLLAND CHRISTIAN SCHOOLS 956 OTTAWA AVE HOLLAND, MI 49423	NONE	PC	OPERATING SUPPORT	1,350,000
HOLLAND MUSEUM 31 WEST 10TH STREET HOLLAND, MI 494233101	NONE	PC	OPERATING SUPPORT	25,000
JOURNEY ACADEMY 161 SPAULDING AVE ADA, MI 49301	NONE	PC	OPERATING SUPPORT	25,000
<b>Total . . . . . ▶ 3b</b>				

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Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
		14	120,861	
		14	262,494	
		18	806,633	
		01	24	
			1,190,012	

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to
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[illegible]

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		<b>Yes</b>	<b>No</b>
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<b>1a(1)</b>	<b>No</b>
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<b>1a(2)</b>		<b>No</b>
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<b>1b(1)</b>	<b>No</b>
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<b>1b(2)</b>		<b>No</b>
--------------	--	-----------

<b>1b(3)</b>		<b>No</b>
--------------	--	-----------

<b>1b(4)</b>		<b>No</b>
--------------	--	-----------

<b>1b(5)</b>		<b>No</b>
--------------	--	-----------

<b>1b(6)</b>		<b>No</b>
--------------	--	-----------

<b>1c</b>		<b>No</b>
-----------	--	-----------

value  
ue

[illegible]

described in section 501(c) (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**Sign  
Here**

\* \* \* \* \*

2018-09-15

\* \* \* \* \*

May the IRS discuss this return with the preparer shown below

(see instr )? ☒ Yes ☐ No

Signature of officer or trustee

Date \_\_\_\_\_

Title

**Paid  
Preparer  
Use Only**

Print/Type preparer's name

Preparer's Signature

Date \_\_\_\_\_

Check if self-

PTIN

P00238135

Firm's name ► BDO USA LLP

Firm's EIN ▶

Firm's address ► 200 OTTAWA AVE NW STE 300

Phone no (616) 774-7000

GRAND RAPIDS, MI 49503

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week devoted to position (b)	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, other allowances (e)
ELSA D PRINCE BROEKHUIZEN 190 S RIVER AVE STE 300 HOLLAND, MI 49423	PRESIDENT 1 0	0	0	0
ERIK D PRINCE 36863 HOMEWOOD LANE MIDDLEBURG, VA 20118	DIRECTOR 1 0	0	0	0
EMILIE WIERDA 3800 60TH ST HOLLAND, MI 49423	DIRECTOR 1 0	0	0	0
EILEEN ELLENS 670 OLD ORCHARD ROAD HOLLAND, MI 49423	DIRECTOR 1 0	0	0	0
ALLAN HOEKSTRA 190 S RIVER AVE STE 300 HOLLAND, MI 49423	SECRETARY/TREASURER 1 0	0	0	0
RENSSELAER O BROEKHUIZEN 190 S RIVER AVE STE 300 HOLLAND, MI 49423	DIRECTOR 1 0	0	0	0

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HAGGAI INSTITUTE 4725 PEACHTREE CORNERS CIRCLE NORCORSS, GA 30092	NONE	PC	OPERATING SUPPORT	600,000
RIDGE POINT COMMUNITY CHURCH 340 140TH AVE HOLLAND, MI 49423	NONE	PC	OPERATING SUPPORT	75,000
HOLLAND CHRISTIAN SCHOOLS 956 OTTAWA AVE HOLLAND, MI 49423	NONE	PC	OPERATING SUPPORT	180,250
<b>Total . . . . . ▶ 3a</b>				3,854,800



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Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
POTTER'S HOUSE CHRISTIAN SCHOOL 810 VAN RAALTE DR SW WYOMING, MI 49509	NONE	PC	OPERATING SUPPORT	62,500
BETHANY CHRISTIAN SERVICES 901 EASTERN AVE NE PO BOX 294 GRAND RAPIDS, MI 49501	NONE	PC	OPERATING SUPPORT	500,000
FAMILY RESEARCH COUNCIL 801 G STREET NW WASHINGTON, DC 20001	NONE	PC	OPERATING SUPPORT	25,000
<b>Total . . . . . ▶ 3a</b>				3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
PRISON FELLOWSHIP MINISTRIES PO BOX 1550 MERRIFIELD, VA 221161550	NONE	PC	OPERATING SUPPORT	95,000
LIFE INTERNATIONAL72 RANSOM NE GRAND RAPIDS, MI 495033217	NONE	PC	OPERATING SUPPORT	20,000
CHRISTIAN LEADERS INSTITUTE 614 FULTON STREET GRAND RAPIDS, MI 49417	NONE	PC	OPERATING SUPPORT	25,000
<b>Total . . . . . ▶ 3a</b>				3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
EVERGREEN COMMONS 480 STATE STREET HOLLAND, MI 49423	NONE	PC	OPERATING SUPPORT	75,000
MISSION EURASIAPO BOX 496 WHEATON, IL 60187	NONE	PC	OPERATING SUPPORT	50,000
WORLD RENEW2852 KALAMAZOO SE GRAND RAPIDS, MI 49424	NONE	PC	OPERATING SUPPORT	25,000
<b>Total . . . . . ▶ 3a</b>				3,854,800

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Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
KUYPER COLLEGE 3333 EAST BELTLINE NE GRAND RAPIDS, MI 49525	NONE	PC	OPERATING SUPPORT	35,000
LEADING THE WAYPO BOX 20100 ATLANTA, GA 30325	NONE	PC	OPERATING SUPPORT	50,000
LIFE FOCUS201 W LAKE ST CHICAGO, IL 60606	NONE	PC	OPERATING SUPPORT	25,000
<b>Total . . . . .</b>			<b>3a</b>	3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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<div>Recipient</div> <div>Name and address (home or business)</div>	<div>If recipient is an individual, show any relationship to any foundation manager or substantial contributor</div>	<div>Foundation status of recipient</div>	<div>Purpose of grant or contribution</div>	<div>Amount</div>
<b>a</b> <i>Paid during the year</i>				
ACTON INSITUTE98 E FULTON STREET GRAND RAPIDS, MI 49503	NONE	PC	OPERATING SUPPORT	30,000
AMERICAN VALUES 2800 SHIRLINGTON RD ARLINGTON, VA 49509	NONE	PC	OPERATING SUPPORT	30,000
FREEDOM ALLIANCE 22570 MARKEY COURT DULLES, VA 20166	NONE	PC	OPERATING SUPPORT	30,000
<b>Total . . . . . ▶ 3a</b>				3,854,800

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GATEWAYS TO BETTER EDUCATION PO BOX 514 LAKE FOREST, CA 926090514	NONE	PC	OPERATING SUPPORT	30,000
GEORGETOWN HARMONY HOMES 8393 10TH AVE JENISON, MI 49428	NONE	PC	OPERATING SUPPORT	50,000
HOSPICE OF HOLLAND 270 HOOVER BLVD HOLLAND, MI 49423	NONE	PC	OPERATING SUPPORT	25,000
<b>Total . . . . . ▶ 3a</b>				3,854,800

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
OPEN DOORSPO BOX 27001 SANTA ANA, CA 92799	NONE	PC	OPERATING SUPPORT	30,000
KEYS FOR KIDS2060 43RD ST SE GRAND RAPIDS, MI 49508	NONE	PC	OPERATING SUPPORT	10,000
HOLLAND TULIP TIME FESTIVAL 74 W 8TH STREET HOLLAND, MI 49423	NONE	PC	OPERATING SUPPORT	25,000
<b>Total . . . . .</b>			<b>3a</b>	3,854,800

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Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
AMERICAN HEART ASSOCIATION 7272 GREENVILLE AVE DALLAS, TX 75231	NONE	PC	OPERATING SUPPORT	10,000
ARTPRIZE41 SHELDON BLVD SE GRAND RAPIDS, MI 49503	NONE	PC	OPERATING SUPPORT	25,000
HOLLAND MUSEUM 31 WEST 10TH STREET HOLLAND, MI 494233101	NONE	PC	OPERATING SUPPORT	25,000
<b>Total . . . . . ▶ 3a</b>				3,854,800



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Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
INTERNATIONAL AID17011 HICKORY ST SPRING LAKE, MI 49456	NONE	PC	OPERATING SUPPORT	20,000
MEDIA RESEARCH CENTER 1900 CAMPUS COMMONS DRIVE STE 600 RESTON, VA 20191	NONE	PC	OPERATING SUPPORT	25,000
YOUNG LIVES293 N 145TH AVE HOLLAND, MI 49424	NONE	PC	OPERATING SUPPORT	50,000
<b>Total . . . . . ▶ 3a</b>				3,854,800

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Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
70 X 7 LIFE RECOVERY 97 W 22ND ST HOLLAND, MI 49423	NONE	PC	OPERATING SUPPORT	20,000
CHRISTIAN LEARNING CENTER 4340 BURLINGAME SW WYOMING, MI 495093770	NONE	PC	OPERATING SUPPORT	25,000
COUNCIL FOR NATIONAL POLICY 1411 K STREET NW SUITE 601 WASHINGTON, DC 20005	NONE	PC	OPERATING SUPPORT	15,000
<b>Total . . . . . ▶ 3a</b>				3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
PARTNERS IN HOUSING 906 S DIVISION AVE SUITE 205 GRAND RAPIDS, MI 49507	NONE	PC	OPERATING SUPPORT	40,000
RIGHT TO LIFE OF MICHIGAN 2340 PORTER ST SW PO BOX 901 GRAND RAPIDS, MI 495090901	NONE	PC	OPERATING SUPPORT	25,000
ZUNI CHRISTIAN MISSION SCHOOL PO BOX 445 ZUNI, NM 87327	NONE	PC	OPERATING SUPPORT	20,000
<b>Total . . . . .</b>				<b>3a</b> 3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COMPASSIONATE HEART MINISTRIES 100 PINE ST 150 ZEELAND, MI 49464	NONE	PC	OPERATING SUPPORT	15,000
HOLLAND DEACON'S CONFERENCE 224 W 30TH ST HOLLAND, MI 49423	NONE	PC	OPERATING SUPPORT	20,000
INTERCOLLEGIATE STUDIES INSTITUTE INC 3901 CENTERVILLE ROAD WILMINTON, DE 19807	NONE	PC	OPERATING SUPPORT	15,000
<b>Total . . . . . ▶ 3a</b>				3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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<div>Recipient</div> <div>Name and address (home or business)</div>	<div>If recipient is an individual, show any relationship to any foundation manager or substantial contributor</div>	<div>Foundation status of recipient</div>	<div>Purpose of grant or contribution</div>	<div>Amount</div>
<b>a</b> <i>Paid during the year</i>				
KIDS HOPE USA100 S PINE STREET ZEELAND, MI 49464	NONE	PC	OPERATING SUPPORT	20,000
WEDGEWOOD CHRISTIAN YOUTH & FAMILY SERVICES 3300 36TH STREET SE GRAND RAPIDS, MI 49512	NONE	PC	OPERATING SUPPORT	30,000
WORDS OF HOPE700 BALL AVE NE GRAND RAPIDS, MI 49503	NONE	PC	OPERATING SUPPORT	20,500
<b>Total . . . . . ▶ 3a</b>				3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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<div>Recipient</div> <div>Name and address (home or business)</div>	<div>If recipient is an individual, show any relationship to any foundation manager or substantial contributor</div>	<div>Foundation status of recipient</div>	<div>Purpose of grant or contribution</div>	<div>Amount</div>
<b>a</b> <i>Paid during the year</i>				
YOUNG LIFE CAPERNAUMPO BOX 520 COLORADO SPRINGS, CO 809010520	NONE	PC	OPERATING SUPPORT	10,000
BARNABAS MINISTRIES 9479 RILEY ST 200 ZEELAND, MI 49464	NONE	PC	OPERATING SUPPORT	10,000
BIBLE LEAGUE1 BIBLE LEAGUE PLAZA CRETE, IL 60417	NONE	PC	OPERATING SUPPORT	10,000
<b>Total . . . . . ▶ 3a</b>				3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CENTER FOR MILITARY READINESS PO BOX 51600 LIVONIA, MI 48151	NONE	PC	OPERATING SUPPORT	15,000
LEADERSHIP INSTITUTE STEVE PJ WOOD BUILDING 1101 NORTH HIGHLAND STREET ARLINGTON, VA 22201	NONE	PC	OPERATING SUPPORT	15,000
MACKINAC CENTER FOR PUBLIC POLICY 140 WEST MAIN STREET PO BOX 568 MIDLAND, MI 48640	NONE	PC	OPERATING SUPPORT	10,000
<b>Total . . . . . ▶ 3a</b>				3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SILVER RING THING 238 MOON CLINTON RD STE 9 MOON TWP, PA 15108	NONE	PC	OPERATING SUPPORT	10,000
SPECTRUM HEALTH FOUNDATION 100 MICHIGAN STREET NE GRAND RAPIDS, MI 49503	NONE	PC	OPERATING SUPPORT	160,000
STARLIGHT MINISTRIES 3376 CENTRAL BLVD HUDSONVILLE, MI 49426	NONE	PC	OPERATING SUPPORT	20,000
<b>Total . . . . . ▶ 3a</b>				3,854,800



**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WEST MICHIGAN AVIATION ACADEMY 5363 44TH STREET SE GRAND RAPIDS, MI 49512	NONE	PC	OPERATING SUPPORT	12,500
WOMEN'S RIGHTS WITHOUT FRONTIERS 722 DULANEY VALLEY ROAD STE 325 TOWSON, MD 21204	NONE	PC	OPERATING SUPPORT	10,000
LOVE INC ALLEGAN COUNTYPO BOX 36 4621 135TH AVE HAMILTON, MI 49419	NONE	PC	OPERATING SUPPORT	15,000
<b>Total . . . . . ▶ 3a</b>				3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
ALTERNATIVES PREGNANCY CARE CENTER 4200 WEST MICHIGAN AVE STE 100 KALAMAZOO, MI 49006	NONE	PC	OPERATING SUPPORT	10,000
HOLLAND CHORALEPO BOX 1513 HOLLAND, MI 494221513	NONE	PC	OPERATING SUPPORT	5,000
LUKE SOCIETY INC 3409 S GATEWAY BLVD 1000 SIOUX FALLS, SD 57106	NONE	PC	OPERATING SUPPORT	5,000
<b>Total . . . . .</b>			<b>3a</b>	3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
PREGNANCY RESOURCE CENTER 415 CHERRY STREET SE GRAND RAPIDS, MI 495034601	NONE	PC	OPERATING SUPPORT	5,000
PREGNANCY SERVICES OF GREATER LANSING 1045 E GRAND RIVER AVE EAST LANSING, MI 48823	NONE	PC	OPERATING SUPPORT	5,000
WESTERN THEOLOGICAL SEMINARY 101 E 13TH ST HOLLAND, MI 49423	NONE	PC	OPERATING SUPPORT	25,000
<b>Total . . . . . ▶ 3a</b>				3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
AMERICANS UNITED FOR LIFE 2101 WILSON BOULEVARD SUITE 525 ARLINGTON, VA 22201	NONE	PC	OPERATING SUPPORT	2,500
JOAN NICOLE PRINCE HOME 22 GLENVIEW DR SCOTIA, NY 12302	NONE	PC	OPERATING SUPPORT	28,000
TURNING POINTE SCHOOL OF DANCE 437 136TH AVE HOLLAND, MI 49424	NONE	PC	OPERATING SUPPORT	1,500
<b>Total . . . . .</b>				<b>3a</b> 3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
ALLIANCE DEFENDING FREEDOM 15100 N 90TH STREET SCOTTSDALE, AZ 85260	NONE	PC	OPERATING SUPPORT	100,000
AMERICAN CANCER SOCIETY 250 WILLIAMS STREET NW ATLANTA, GA 30303	NONE	PC	OPERATING SUPPORT	1,300
AMERICAN PUBLIC RADIO 480 CEDAR STREET ST PAUL, MN 55101	NONE	PC	OPERATING SUPPORT	35,000
<b>Total . . . . . ▶ 3a</b>				3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
AQUINAS COLLEGE 1607 ROBINSON RD SE GRAND RAPIDS, MI 49506	NONE	PC	OPERATING SUPPORT	1,000
BETHSHAN12927 S MONITOR AVE PALOS HEIGHTS, IL 60463	NONE	PC	OPERATING SUPPORT	5,000
BIG RED FOUNDATION 305 HOOVER BLVD STE 400 HOLLAND, MI 49423	NONE	PC	OPERATING SUPPORT	2,500
<b>Total . . . . . ▶ 3a</b>				3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
BUEN PASTOR MINISTRIES 111 W 13TH ST HOLLAND, MI 49423	NONE	PC	OPERATING SUPPORT	2,500
BUFFALO BILL CENTER OF THE WEST 720 SHERIDAN AVE CODY, WY 82414	NONE	PC	OPERATING SUPPORT	500
CARY CHRISTIAN CENTERPO BOX 57 CARY, MS 39054	NONE	PC	OPERATING SUPPORT	2,500
<b>Total . . . . . ▶ 3a</b>				3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CENTER FOR URBAN RENEWAL & EDUCATION 1317 F STREET NW SUITE 900 WASHINGTON, DC 20004	NONE	PC	OPERATING SUPPORT	40,000
CODY RECREATION FOUNDATION PO BOX 1531 CODY, WI 82414	NONE	PC	OPERATING SUPPORT	10,000
COMPASS FILM ACADEMY 41 SHELDON BLVD SE GRAND RAPIDS, MI 49503	NONE	PC	OPERATING SUPPORT	15,000
<b>Total . . . . . ▶ 3a</b>				3,854,800



**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CONCERNED WOMEN FOR AMERICA 1000 N PAYNE STREET ALEXANDRIA, VA 22314	NONE	PC	OPERATING SUPPORT	10,000
CROSSROADS PRISON MINISTRIES PO BOX 900 GRAND RAPIDS, MI 49509	NONE	PC	OPERATING SUPPORT	11,000
DEAF OPPORTUNITY OUTREACH 135 N STATE ST 200 ZEELAND, MI 49464	NONE	PC	OPERATING SUPPORT	50,000
<b>Total . . . . . ▶ 3a</b>				3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
ELIM CHRISTIAN SERVICES 13020 S CENTRAL AVE CRESTWOOD, IL 60418	NONE	PC	OPERATING SUPPORT	5,000
FOCUS ON THE FAMILY 8605 EXPLORER DR COLORADO SPRINGS, CO 80920	NONE	PC	OPERATING SUPPORT	10,000
GIDEON'S INTERNATIONAL PO BOX 140800 NASHVILLE, TN 37214	NONE	PC	OPERATING SUPPORT	1,000
<b>Total . . . . .</b>				<b>3a</b> 3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GRAND HAVEN CHRISTIAN SCHOOLS 1102 GRANT AVE GRAND HAVEN, MI 49417	NONE	PC	OPERATING SUPPORT	15,000
GRAND RAPIDS CHRISTIAN SCHOOLS 1508 ALEXANDER ST SE GRAND RAPIDS, MI 49506	NONE	PC	OPERATING SUPPORT	5,000
HOLLAND RESCUE MISSION 661 EAST 24TH ST SUITE 300 HOLLAND, MI 49423	NONE	PC	OPERATING SUPPORT	25,000
<b>Total . . . . . ▶ 3a</b>				3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
HOPE COLLEGE 141 E 12TH ST HOLLAND, MI 49423	NONE	PC	OPERATING SUPPORT	1,500
HUDSONVILLE CHRISTIAN SCHOOLS 3435 OAK ST HUDSONVILLE, MI 49426	NONE	PC	OPERATING SUPPORT	10,000
INSTITUTE OF WORLD POLITICS 1521 16TH ST NW WASHINGTON, DC 20036	NONE	PC	OPERATING SUPPORT	5,000
<b>Total . . . . . ▶ 3a</b>				3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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<div>Recipient</div> <div>Name and address (home or business)</div>	<div>If recipient is an individual, show any relationship to any foundation manager or substantial contributor</div>	<div>Foundation status of recipient</div>	<div>Purpose of grant or contribution</div>	<div>Amount</div>
<b>a</b> <i>Paid during the year</i>				
JOURNEY ACADEMY 161 SPAULDING AVE SE ADA, MI 49301	NONE	PC	OPERATING SUPPORT	25,000
JUDICIAL WATCH 425 THIRD STREET SW WASHINGTON, DC 20024	NONE	PC	OPERATING SUPPORT	2,500
LAKESHORE HABITAT FOR HUMANITY 12727 RILEY ST HOLLAND, MI 49424	NONE	PC	OPERATING SUPPORT	50,000
<b>Total . . . . . ▶ 3a</b>				3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
LAKESHORE PREGNANCY CENTER 339 S RIVER AVE HOLLAND, MI 49423	NONE	PC	OPERATING SUPPORT	5,000
LIVE ACTION 2200 WILSON BLVD SUITE 102 PMB 111 ARLINGTON, VA 22201	NONE	PC	OPERATING SUPPORT	50,000
OUTDOOR DISCOVERY CENTER 4214 56TH ST HOLLAND, MI 49423	NONE	PC	OPERATING SUPPORT	50,000
<b>Total . . . . .</b>			<b>3a</b>	3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
PEOPLE HELPING PEOPLE OF PULLMAN INC 925 56TH ST PULLMAN, MI 49450	NONE	PC	OPERATING SUPPORT	32,000
PROTECT LIFE MICHIGANPO BOX 23042 LANSING, MI 48909	NONE	PC	OPERATING SUPPORT	15,000
SPECIAL OLYMPICS OF MICHIGAN CENTRAL MICHIGAN UNIVERSITY MOUNT PLEASANT, MI 48859	NONE	PC	OPERATING SUPPORT	2,000
<b>Total . . . . . ▶ 3a</b>				3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
STUDENTS FOR LIFE OF AMERICA 4755 JEFFERSON DAVIS HIGHWAY FREDERICKSBURG, VA 22408	NONE	PC	OPERATING SUPPORT	5,000
SUMMIT MINISTRIESPO BOX 207 MANITOU SPRINGS, CO 80829	NONE	PC	OPERATING SUPPORT	25,000
VAN ANDEL INSTITUTE 333 BOSTWICK AVE NE GRAND RAPIDS, MI 49503	NONE	PC	OPERATING SUPPORT	1,000
<b>Total . . . . . ▶ 3a</b>				3,854,800



**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
WINGS HOME530 LINN ST ALLEGAN, MI 49010	NONE	PC	OPERATING SUPPORT	2,000
WINGS OF MERCY 100 S PINE ST SUITE 393 ZEELAND, MI 49464	NONE	PC	OPERATING SUPPORT	250
WINNING AT HOME300 S STATE ST ZEELAND, MI 49464	NONE	PC	OPERATING SUPPORT	300,000
<b>Total . . . . .</b>			<b>3a</b>	3,854,800

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
WORLD LITERACY FOUNDATION PO BOX 44 GRANDVILLE, MI 49468	NONE	PC	OPERATING SUPPORT	10,000
WORLD OF LIFE BAPTIST CHURCH 1900 N BAGLEY ST ALPENA, MI 49707	NONE	PC	OPERATING SUPPORT	1,000
YWAM OF MONTANA501 BLACKTAIL RD LAKESIDE, MT 59922	NONE	PC	OPERATING SUPPORT	7,500
<b>Total . . . . . ▶ 3a</b>				3,854,800

**TY 2018 Accounting Fees Schedule****Name:** EDGAR AND ELSA PRINCE FOUNDATION**EIN:** 38-2190330

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	8,496	4,248		4,248

**Note:** To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## **TY 2018 Depreciation Schedule**

**Name:** EDGAR AND ELSA PRINCE FOUNDATION

**EIN:** 38-2190330

## TY 2018 Investments Corporate Bonds Schedule

**Name:** EDGAR AND ELSA PRINCE FOUNDATION

**EIN:** 38-2190330

### Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
WELLS FARGO - SEE ATTACHED	12,423,241	12,536,056

## TY 2018 Investments Corporate Stock Schedule

**Name:** EDGAR AND ELSA PRINCE FOUNDATION

**EIN:** 38-2190330

### Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ALTIMA STOCK	150,000	
WELLS FARGO - SEE ATTACHED	1,866	1,866

**TY 2018 Other Expenses Schedule****Name:** EDGAR AND ELSA PRINCE FOUNDATION**EIN:** 38-2190330**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
NOTE MATCHING REDUCTION	175,000			
AGREEMENT				

## TY 2018 Other Income Schedule

**Name:** EDGAR AND ELSA PRINCE FOUNDATION

**EIN:** 38-2190330

### Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
MISCELLANEOUS INCOME	24		



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**TY 2018 Other  
Notes/Loans Receivable  
Long Schedule**

**Name:** EDGAR AND ELSA PRINCE FOUNDATION

**EIN:** 38-2190330

Borrower's Name	Relationship to Insider	Original Amount of Loan	Balance Due	Date of Note	Maturity Date	Repayment Terms	Interest Rate	Security Provided by Borrower	Purpose of Loan	Description of Lender Consideration	Consideration FMV
FAITH FAMILY FREEDOM LLC		3,500,000	2,450,000				0 %				

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**TY 2018 Other Professional Fees Schedule**

**Name:** EDGAR AND ELSA PRINCE FOUNDATION

**EIN:** 38-2190330

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEE	68,468	68,468		

**TY 2018 Taxes Schedule****Name:** EDGAR AND ELSA PRINCE FOUNDATION**EIN:** 38-2190330

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES PAID	9,894	9,894		